

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Substitute for form 1449A/PTO

(use as many sheets as necessary)

**Complete if Known**

<b>Application Number</b>	10/588,555
<b>Filing Date</b>	August 4, 2006
<b>First Named Inventor</b>	Svendson et al
<b>Art Unit</b>	1652
<b>Examiner Name</b>	S. Swope
<b>Attorney Docket Number</b>	10517.204-US

Sheet	1	of	2
-------	---	----	---

[illegible][illegible]

Examiner Signature	/Sheridan Swope/	Date Considered	04/02/2009
--------------------	------------------	-----------------	------------

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language Translation is attached.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /S.S./

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>				<b>Complete if Known</b>	
				Application Number	10/588,555
				Filing Date	August 4, 2006
				First Named Inventor	Svendson et al
				Art Unit	1652
				Examiner Name	S. Swope
Sheet	2	of	2	Attorney Docket Number	10517.204-US

OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS			
Examiner's Initials	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T <sup>2</sup>

Examiner Signature		Date Considered	
-----------------------	--	--------------------	--

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner of Patents, Washington, DC 20231.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /S.S./